

Unveiling URAC's Updated Health Plan Accreditation Programs

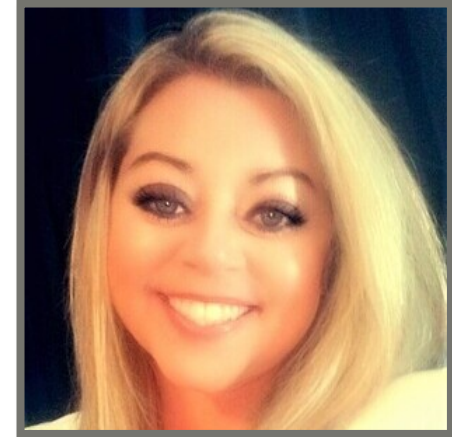
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Before We Get Started



Message Nick
Davis for any
tech issues



Use the chat
box for
questions and
to *introduce*
yourself



Explore
resources
we'll share in
the chat box

About URAC



Leader in Specialty Pharmacy, Telehealth and Remote Patient Monitoring Accreditation

URAC's forty-plus accreditations include Utilization Management, Health Plan, Health Network, Population Health, Medicaid and Long-term Services and Supports



Diverse Stakeholders Govern URAC



Benefits of Accreditation



Provides a
quality
framework



Ensures
continuous
quality
improvement



Independent,
third-party
verification of
a quality
program



Demonstrates
leadership
and initiative
in a growing
field



*Leaders and teams use accreditation to
improve performance and demonstrate value*

URAC's Health Care Management Programs



Digital Health

- Telehealth Accreditation
- Remote Patient Monitoring Accreditation
- Telehealth Support Services Certification
- Health Website Accreditation
- Health Content Provider Certification



Mental Health and Substance Use Disorder (MH/SUD) Parity

- MH/SUD Parity Compliance Guide
- ParityManager™ Compliance Software
- MH/SUD Parity Accreditation



Patient Care Management

- Health Utilization Management Accreditation
- Health Utilization Management Certification
- Independent Medical Examination Accreditation
- Independent Review Organization Accreditation
- Case Management Accreditation
- Health Call Center Accreditation
- Disease Management Accreditation
- Workers' Compensation Utilization Management Accreditation



Administrative Management

- Health Care Management Certification
- Contact Center Certification
- Clinically Integrated Network Accreditation
- Patient-Centered Medical Home Accreditation
- Accountable Care Accreditation
- Credentials Verification Organization Accreditation
- Provider-based Population Health Accreditation
- Employer-based Population Health Accreditation



Health and Dental Plan

- Health Plan Accreditation
- Health Plan with Long-term Services and Supports
- Marketplace Health Plan Accreditation
- Medicaid Health Plan
- Medicaid Health Plan with Long-term Services and Supports
- Medicare Advantage Accreditation
- Dental Plan Accreditation
- Health Network Accreditation
- Dental Network Accreditation

Multiple Options for Accreditation

**Health Plan
Accreditation 8.0***

**Marketplace Health
Plan Accreditation
8.0**

**Medicaid Health
Plan Accreditation
1.0***

**Health Network
Accreditation 8.0**

**Health Utilization
Management
Accreditation 8.0**

**Workers'
Compensation
Utilization
Management
Accreditation 8.0**

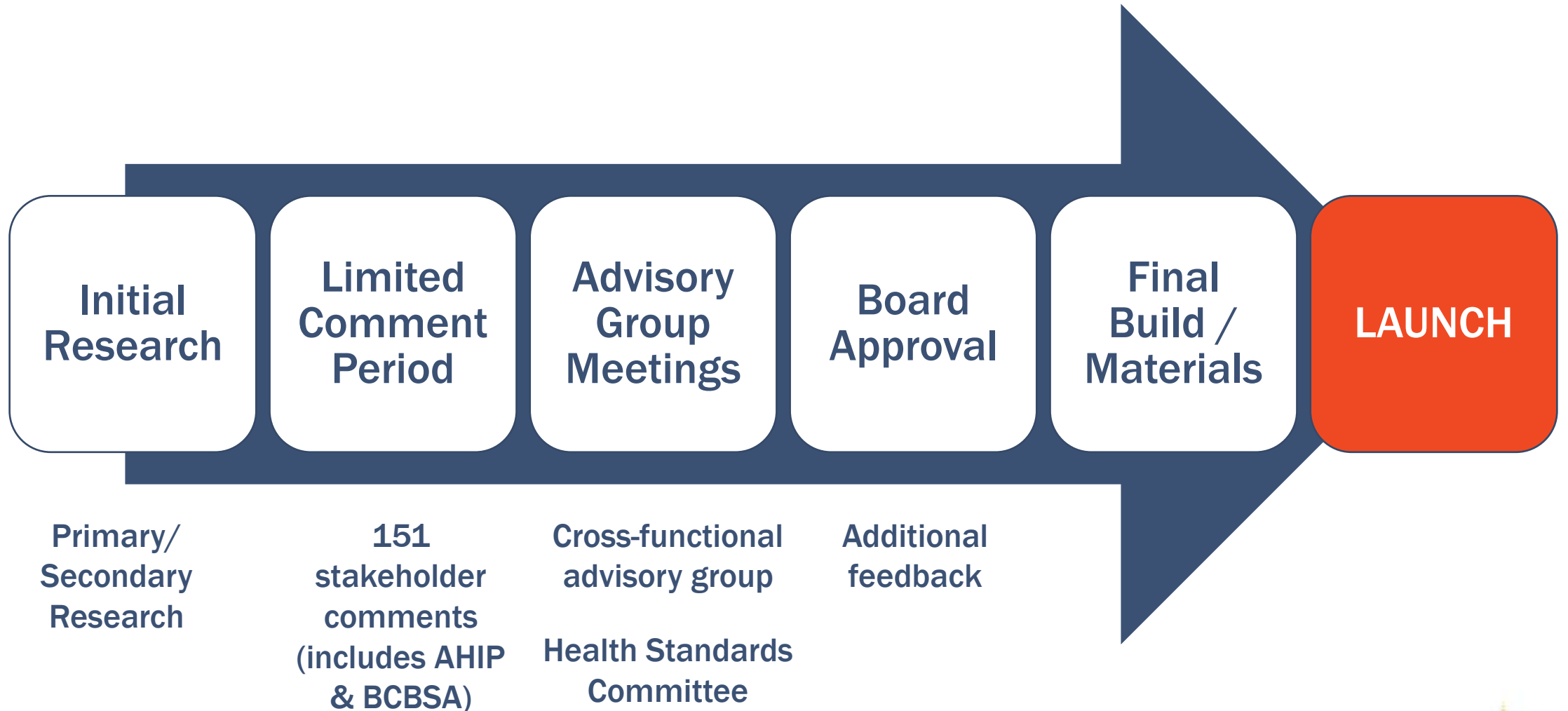
** Option to add Long-term Services and Supports Program*

URAC Accreditation is available in all 50 States, Washington, DC and Puerto Rico



URAC Accreditation fulfills state accreditation requirements in 13 states

Our Development Process



Market Changes

- Market Expansion: Medicaid and Marketplace
- Mental Health Parity Legislation and Enforcement
- Artificial Intelligence and Machine Learning
- Telehealth
- Diversity, Equity and Inclusion
- Consumerism/Member Engagement

Health Plan Needs

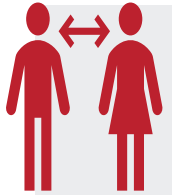
- Clinical, Quality, Cost and Risk Management
- Population Health
- Complex Care Management
- Social Determinants of Health
- Long-term Services and Supports
- Measures Meet Industry Requirements

Industry Feedback

- Simplify and Eliminate Program Redundancy
- Strengthen Validation Methods
- Increase Health Plan performance
- Introduce Market Competition
- Offer Choice
- Address Health Management Associate's *Fit For California Report*

Drivers for Health Plan Revision

Enhanced Value to Health Plans



Standards support increased member engagement



Streamlined accreditation process for multiple lines of business



Peace of mind for federal and state mental health parity requirements



Standards aligned with URAC PBM requirements



Plans establish their own performance goal metrics



National standards support risk management



Addresses regulatory requirements for network management



Flexible pricing for smaller plans. Lowest cost in market



Plans can leverage accreditation to access new markets

Emphasis: Mental Health Parity (MHP) and Behavioral Health



- Streamlined MHP requirements
 - Plan demonstrates MHP analysis
 - URAC's ParityManager™ platform may be used
- Emphasized access to behavioral health practitioners
- Standards look for demonstration of member access to service through reports and analysis of member complaints

What's New: Population Health Requirement

- Comprehensive strategic plan that addresses members with complex medical needs
- Interventions will address population health needs across the care continuum
- URAC recognizes limitations of data available to health plans
- Strategic plans clearly address barriers to obtaining health data via research of data sources and exchange of data with providers



What's New: Medicaid Health Plan



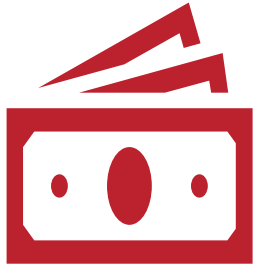
- Aligns with Federal requirements
- Effectively manage growing Medicaid enrollment
- Standards serve as a guide for excellence for current plans or new plans looking to enter the market

What's New: Long-term Services and Supports Option

- Program supports health plan members in their communities
- Standards look at best practices in case management that support the independence of members
- Continued emphasis on best practices that reduce rehospitalization rates and lower costs



How URAC is Different



Pricing options for smaller and regional health plans



Collaborative educational review process



Ease of transition to URAC accreditation



Timing to fit your schedule

Accreditation Timeline

URAC's updated and streamlined standards allow organizations to earn accreditation in less than a year



Questions

Connect with URAC

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